TRIBUTE TO HOWELL L. HODGSKIN, JR. FOR LONGTIME SERVICE TO CENTRAL NEW YORK AND THE U.S. MILITARY ACADEMY

### HON. JAMES T. WALSH

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Tuesday, November 14, 2000

Mr. WALSH. Mr. Speaker, at the conclusion of this admissions season, Mr. Howell L. Hodgskin, Jr. will retire after twelve years of service to Upstate New York as our region's admissions field representative for the United States Military Academy at West Point.

Mr. Hodgskin, a graduate of West Point and a one-time commissioned officer in the United States Army, has served as the U.S. Military Academy's liaison officer for seven different Members of Congress—Sherwood Boehlert, John McHugh, Maurice Hinchey, Bill Paxon, Tom Reynolds, Amory Houghton, and me—as we annually seek to make nominations to the nation's service academies.

After distinguished service in the Army, Mr. Hodgskin was employed as a program manager and radar engineer for the General Electric Company in Syracuse from 1956 to 1989. Since his retirement from General Electric, Mr. Hodgskin has proved invaluable as Upstate's Congressional liaison to West Point. His contributions have assisted Central New York's finest young people in their efforts to enroll in the United States Military Academy.

As he prepares to step down from this important role, I salute him on behalf of the residents of New York's 25th Congressional District for his service and dedication to West Point and our nation. The best of luck always, Hodge.

TRIBUTE TO COMMANDER VIRGINIA TORSCH, UNITED STATES NAVAL RESERVE

#### HON. JAMES P. MORAN

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, November 14, 2000

Mr. MORAN of Virginia. Mr. Speaker, I rise today to pay tribute to an exceptional leader in recognition of her remarkable service to her country, both on active duty and in the reserves, and as a staunch advocate of improved health care benefits for members of the uniformed services community. CDR Virginia Torsch's truly distinguished record merits special recognition on the occasion of her departure from The Retired Officers Association (TROA) to a position in the private sector.

CDR Virginia Torsch received her Bachelor of Science degree in Zoology from the University of Maryland in 1978, and completed her Master's of Health Science in International Health at Johns Hopkins School of Public Health and Hygiene, Baltimore, Maryland in 1982.

A year later, in 1983, CDR Torsch became a commissioned officer in the U.S. Navy's Medical Service Corps. She was sent to the Naval Hospital, Pensacola, Florida where she served eleven months as the Assistant Comptroller. She then transferred to the Armed Forces Medical Intelligence Center, Fort

Detrick, Maryland as a medical intelligence research specialist, writing medical studies on countries in Southeast Asia. Three years later in 1987, CDR Torsch transferred to the Pentagon where she served on the Navy Surgeon General's staff as the Assistant for Fleet Support in the Medical Operations and Planning Division. During this tour, CDR Torsch also completed the Naval War College's seminar program, graduating with distinction in 1989. In November 1990, CDR Torsch affiliated with the Navy Reserves where she is currently attached to the National Naval Medical Command Bethesda 106 unit.

In December, 1990, after leaving active duty, CDR Torsch joined the Strategy 2000 staff at the Paralyzed Veterans of America (PVA). While there, she assisted with the development and publication of "Strategy 2000: The VA Responsibility in Tomorrow's National Health Care System", which analyzed the potential impact of national health care reform on the VA medical care system. CDR Torsch also tracked and analyzed health care reform legislation and initiatives, both at the national and state levels.

In October, 1992, CDR Torsch joined the staff at The Retired Officer's Association as the Assistant Director of Government Relations. Health Affairs, where for the last eight years she has worked tirelessly to advance legislation guaranteeing lifetime health care for uniformed services beneficiaries. Because of her strong health care background, CDR Torsch was made TROA's principal representative to The Military Coalition's Health Care Committee. To illustrate the significance of this assignment, it is helpful to note that The Military Coalition (TMC) is a consortium of 31 nationally prominent military and veterans organizations, representing more than 5.5 million members plus their families and survivors.

Shortly after beginning her liaison with TMC, CDR Torsch was elected to the position of the Co-chairman of the TMC Health care Committee because of her ability to articulate forcefully the urgency of providing lifetime health care to members of the greatest generation and their successors and in recognition of her practical insights on the best legislative strategy to achieve that goal. CDR was a major contributor to the Coalition's Health Alternative Reform Taskforce (CHART) study, which identified several innovative ways to provide lifetime health care to military beneficiaries who were locked out of military treatment facilities when they attained Medicare eligibility. That landmark study became the blueprint for several laws that were enacted in the last five years.

In 1997, Congress enacted a three-year demonstration of a concept called Medicare subvention, through which the Health Care Financing Administration would reimburse the Department of Defense (DOD) for care provided to Medicare-eligible members of the uniformed services community in Military Treatment Facilities (MTFs). That program, now called TRICARE Senior Prime, was included in the Balanced Budget Act of 1997 and is currently in operation at 10 MTFs.

Over the years, CDR Torsch and other members of The Military Coalition have worked very closely with my staff in developing an option to allow Medicare-eligible service beneficiaries to enroll in the Federal Employees Health benefits Program (FEHBP), the same program that is available to virtually

all Federal civilian employees, Congressional staff members and Members of Congress. In 1998, an amendment to the FY 1999 National Defense Authorization Act (NDAA), which I sponsored along with my distinguished colleagues, WILLIAM MAC THORNBERRY and J.C. WATTS, provided authority for DOD to conduct a three-year demonstration to determine the financial and other impacts of allowing Medicare-eligible service beneficiaries to enroll in FEHBP. The test of FEHBP-65, as it is called, is also underway at 10 locations around the country. I am convinced the results of this demonstration will prove conclusively that FEHBP is a cost-effective and viable option that should be made available to all retirees.

The FY 1999 NDAA also provided authority to conduct two other demonstrations for Medicare-eligible retirees which CDR Torsch and the coalition collaborated on with the Armed Services Committees: TRICARE as second-payer to Medicare; and the enrollment in DOD's mail order and retail pharmacy programs.

CDR Torsch's unwavering efforts to provide a meaningful health care benefit to Medicareeligible members of the uniformed services community culminated this year when Congress established in the FY 2001 National Defense Authorization Act a lifetime entitlement to TRICARE for service retirees, their family members and survivors. Effective on October 1, 2001, the TRICARE-for-Life option will not require participants in this program to pay enrollment fees or deductibles. CDR Torsch and the Military Coalition also advocated successfully to have Congress offer a TRICARE prescription drug benefit in the final FY 2001 NDAA. As evidence of her commitment and effectiveness in advocating on behalf of military retirees, Congress also adopted a key recommendation offered by CDR Torsch in her testimony earlier this year that beneficiaries should not be required to pay enrollment fees or premiums to participate because doing so would deny this benefit to those who need it most.

Taken together, these initiatives comprise the most significant improvements in military health care ever undertaken. Thanks in large measure to the dedication by CDR Torsch, TROA and other advocates of military retirees, Congress has demonstrated its commitment to providing lifetime health care to our nation's military personnel and their families. I commend their involvement in this area and believe these efforts should prove invaluable in reversing declining retention and readiness trends in all services.

Mr. Speaker, CDR Torsch has been a leader in every sense of the word—a leader in TROA, the Military Coalition and the entire retired community. Her health care contributions have made an indelible mark on the lives of millions of retirees that will benefit them for years to come. I urge you to join me in wishing her continued success in her new endeavors and in her continued service to this nation.

#### CONCERNING ABILENE PHILHARMONIC ORCHESTRA

#### HON. CHARLES W. STENHOLM

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES Tuesday, November 14, 2000

Mr. STENHOLM. Mr. Speaker, I would like to recognize the 50th anniversary of one of

Abilene's oldest performing arts organizations, the Abilene Philharmonic Orchestra on December 2 of this year. This great symphony orchestra enriches the cultural life of a city in a unique way; it creates a place where fine musicians want to live and teach and perform. In the 1950-opening season, concerts were held in the old Abilene High School with audiences of less than 100 people. Currently the Abilene Philharmonic Orchestra performs in the Abilene Civic Center with crowds averaging 2,000. I would not only like to acknowledge this organization for their 50th anniversary, but also the impact they have had on the Abilene community.

HONORING A SPECIAL COLORADO FAMILY

# HON. BOB SCHAFFER

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Tuesday, November 14, 2000

Mr. SCHAFFER. Mr. Speaker, today I rise to honor a hard working family from Flagler, CO. Florence Fuller works with her daughter and son-in-law, Sally and Mike Santala on their farm in northeast Colorado. They survive Florence's husband, Eddie, who began the family tradition of finding new ways of conserving natural resources on their farm. It is that tradition that has earned the Fuller family the Farming Conservationist Award from the Colorado Association of Soil Conservation Districts at its 56th annual meeting in Grand Junction, Monday, November 13. Each year, the association awards the title of Conservationist of the Year to landowners who exemplify leadership in land stewardship.

The Fullers first came to Kit Carson County in 1948 and immediately took a leadership role in their local community. Eddie Fuller helped organize the Flagler Soil Conservation District in 1951 and acted as the organization's Secretary-Treasurer for 16 years. The Fuller farm now encompasses 860 acres of cropland, 97 acres of hay meadow, and 2,500 acres of rangeland at the base of the Colorado Rocky Mountains. It is because of the Fuller family's innovative work with rotational grazing techniques and other conservation methods that the Colorado Association of Conservation Districts has bestowed upon them such an honor, and it is because of their contributions to their community and the environment that I stand here to recognize them

MOTION TO INSTRUCT CONFERES ON H.R. 4577, DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIA-TIONS ACT 2001

SPEECH OF

## HON. JOE BARTON

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Tuesday, October 31, 2000

Mr. BARTON of Texas. Mr. Speaker, I rise today to oppose this motion. It is fitting this motion was brought on October 31, because this is pure Halloween politics by the minority

party designed to scare Americans a week before the Presidential election. The timing of the motion, and the study upon which this motion is based, are questionable at best. One week before an election, the Minority Staff of the Government Reform Committee releases a report criticizing the condition of Texas nursing homes.

Some have tried to pass this study off as non-partisan. I have a hard time believing such a claim. This study was conducted unbeknownst to the majority staff at the Government Reform Committee. This was not an effort to accurately gauge the conditions of Texas nursing homes. This was purely political. The Gore-Lieberman website posted the study and commentary on it before it was released to Majority Members of the Government Reform Committee. It also breeds suspicion that days before this report was released, the Democratic National Committee began an advertising campaign on the state of nursing homes in Texas.

If this was a non-partisan study then are we supposed to believe that it was a mere coincidence the study was released on the heels of these ads being run. Even if we are to blindly accept such a coincidence, the release of the study to the Gore-Lieberman campaign before it was given to Majority Members of the Government Reform Committee clearly demonstrate that this study was nothing more than partisan political propaganda.

More disheartening than the timed release of this study was the facts ascertained and the conclusions reached by the study are a clear misrepresentation of the conditions of nursing homes in Texas. I agree that we must take steps to improve the care that patients receive in nursing homes. However, as a Texan I take great umbrage at this one-sided hatchet job designed to embarrass my state.

If we look at the objective facts we find a much different picture of Texas nursing homes than painted by the Minority Staff Report. In September 2000, the non-partisan General Accounting Agency (GAO) issued a comprehensive study that directly disputes the claims made in the partisan minority report. The GAO concluded that the percentage of homes in Texas cited for harm and immediate jeopardy deficiencies were half what the partisan Minority study claims.

The Minority Staff study claims that over 50 percent of the nursing homes in Texas had violations that caused actual harm to residents or placed them at risk of death or serious injury. According to the September GAO report, the percentage of homes with actual harm and immediate jeopardy deficiencies from January 1997 to July 2000 were only 25 percent—half what the Minority report stated. We must work to reduce this number, but it also clearly demonstrates how the Minority report attempted to overstate the problem in a partisan effort to embarrass Texas.

The University of California San Francisco Department of Social and Behavioral Sciences conducted a nationwide study of nursing facility deficiencies in which Texas nursing homes rated better than most other states. The study examined the percentage of nursing homes with deficiencies in ten different areas; Comprehensive Assessments, Accident Prevention, Housekeeping, Dignity, Physical Restraints, Food Sanitation, Accidents, Quality of Care, Pressure Sores, and Comprehensive Care Plans. In Calendar Year 1998, the last year of

the study, Texas nursing homes had lower indices of deficiencies than the normal average in eight of these categories.

In the percentage of Quality of Care deficiencies, Texas nursing homes are below the national average, while a state like Connecticut is a staggering 19 percent above the national average, and above the national average in four of ten categories. In the percentage of Food Sanitation deficiencies, Texas is half a percentage point above the national average. However, Tennessee is over eight percent above the national average in Food Sanitation deficiencies. Instead of attempting to misrepresent the Texas record for political gain, the Gore-Lieberman ticket should be focusing their efforts on improving nursing home conditions in their home states.

In Texas we understand there are problems within our nursing home system, and we have taken steps to correct them. In 1995 and 1997, Texas passed legislation that instituted: new requirements for background checks on nursing home operators, new enforcement measures on non-compliant nursing homes, and mandated standards for quality of life and quality of care. A facilities compliance with these standards must be made available to the public and explained to nursing home residents as well as their next of kin.

According to a March 1999 GAO report on nursing homes, Texas spends more than other states on compliant expenditures per home. It also shows that the only state with more compliant visits per 1,000 beds is Washington. Many experts believe that compliant investigators are more important than the standard surveys required not less frequently than every 15 months. This is believed to be this case because complaints can be a good indicator of a current problem in a facility, that a compliant visit comes as a surprise and thus gives surveyors a more accurate picture of what is going on in a facility.

We passed the Boren Amendment in the Balanced Budget Act of 1997 to remove states Medicaid spending from the crippling effects of court mandated reimbursements. The Boren Amendment was enacted to provide more fiscal discipline in the Medicaid program. However, the vague wording of the amendment subjected states to numerous court orders that led to Medicaid spending spiraling out of control. A major proponent of eliminating the Boren Amendment was President Clinton. The President, in an August 1999 speech to the National Governors Association, stated, "We've waived or eliminated scores of laws and regulations on Medicaid, including one we all wanted to get rid of, the so-called Boren Amendment." Eliminating this provision was a bipartisan effort which both parties agreed to.

If the Boren Amendment is not working, and the proof is not there that it isn't, then let's follow the procedures dictated by the Balanced Budget Act of 1997. In this statue a provision was included that asks the Secretary of the Department of Health and Human Services to conduct a study on access to, and quality of, the services provided to beneficiaries subject to the rate setting method used by the states. That report is due 4 years after the enactment of B.B.A. 97 which puts us in August of next year. This report will give accurate information on the effects on repeal of the Boren Amendment, and if there is a need to have it reinstated.

This is Halloween, but don't be fooled. If we need to reexamine the repeal of the Boren